| Case 09-13155   |               | Document | Entered 04/14/09 11:51:42<br>Page 1 of 40  | Desc Main     |  |  |  |  |
|---|---------------|----------|--|---------------|--|--|--|--|
| B22A (Official Form 22A) (Chapt   | ter 7) (12/03 | 8)       | According to the information required to statement (check one box as directed in statement): |               |  |  |  |  |
|   |               |          | ☐ The presumption arises   |               |  |  |  |  |
| In re: Arnold, Randall W.   |               |          | <b>▼</b> The presumption does not arise  |               |  |  |  |  |
| Debtor(   | (s)           |          | ☐ The presumption is temporarily i   | inapplicable. |  |  |  |  |
| Case Number:  |               |          |  |               |  |  |  |  |
| (If know  | vn)           |          |  |               |  |  |  |  |
| CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME<br>AND MEANS-TEST CALCULATION |               |          |  |               |  |  |  |  |

VI of this

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. MILITARY AND NON-CONSUMER DEBTORS

| Disabled Veterans. If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the vetification in Part VIII. Do not complete any require in 38 U.S.C. \$ 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 38 U.S.C. \$ 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. \$ 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. \$ 901(1)).  Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.    Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.    Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. \$ 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. \$ 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for \$40 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period conds, unless the time for filing a motion raising the means test presumption expires in your case before your exc |    |  |
|---|----|--|
| in Part VIII. Do not complete any of the remaining parts of this statement.    Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.    Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.    Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard    A  | 1A | the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  Uteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in   |
| of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.  Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard  a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I has released from active duty on, which is less than 540 days before this bankruptcy case was filed;  OR  b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on,   | 1B | in Part VIII. Do not complete any of the remaining parts of this statement.  |
|   | 1C | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.  Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard  a. Draward Forces or the National Guard Forces or the |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 2 of 40

|   | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION   |  |  |  |  |                       |           |                                |  |  |
|---|--|--|--|--|--|-----------------------|-----------|--------------------------------|--|--|
|   |  | rital/filing status. Check the box that  |  | •  | •  | stateme               | nt as dir | ected.                         |  |  |
|   |  | <ul> <li>a.  Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>b.  Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11.</li> </ul> |  |  |  |                       |           |                                |  |  |
| 2 | c  | Married, not filing jointly, without Column A ("Debtor's Income")  |  |  |  |                       | ve. Con   | nplete both                    |  |  |
|   | d. [   | Married, filing jointly. Complete Lines 3-11.  | both Column A  | A ("Debtor                                 | 's Income") and Column                           | B ("Spo               | use's In  | come") for                     |  |  |
|   | the s  | figures must reflect average monthly ix calendar months prior to filing the th before the filing. If the amount of divide the six-month total by six, as   | e bankruptcy ca<br>monthly incon                       | ase, ending<br>ne varied du                | on the last day of the uring the six months, you | Colum<br>Debt<br>Inco | tor's     | Column B<br>Spouse's<br>Income |  |  |
| 3 | Gro  | ss wages, salary, tips, bonuses, ove   | ertime, commis   | ssions.                                    |  | \$                    |           | \$                             |  |  |
| 4 | a and<br>one l   | ome from the operation of a busined<br>d enter the difference in the appropriate business, profession or farm, enter a<br>chment. Do not enter a number less tenses entered on Line b as a deduce  | iate column(s) oggregate numb<br>han zero. <b>Do n</b> | of Line 4. It<br>ers and pro<br>ot include | f you operate more than vide details on an       |                       |           |                                |  |  |
| . | a.   | Gross receipts   |  | \$   | 583.33   |                       |           |                                |  |  |
|   | b.   | Ordinary and necessary business of   | expenses   | \$   | 50.00  |                       |           |                                |  |  |
|   | c.   | Business income  |  | Subtract I                                 | \$   | 533.33                | \$        |                                |  |  |
| _ | diffe  | t and other real property income.  The rence in the appropriate column(s) of the include any part of the operating of the vertical to the column (s).  | of Line 5. Do no                                       | ot enter a n                               | umber less than zero. <b>Do</b>                  |                       |           |                                |  |  |
| 5 | a.   | Gross receipts   |  | \$   |  |                       |           |                                |  |  |
|   | b.   | Ordinary and necessary operating   | expenses   | \$   |  |                       |           |                                |  |  |
|   | c. Rent and other real property income Subtract Line b from Line a   |  |  |  |  | \$                    |           | \$                             |  |  |
| 6 | Inte   | rest, dividends, and royalties.  |  |  |  | \$                    |           | \$                             |  |  |
| 7 | Pens   | sion and retirement income.  |  |  |  | \$                    |           | \$                             |  |  |
| 8 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. |  |  |  |  |                       |           | \$                             |  |  |
| 9 | How<br>was   | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  |  |  |  |                       |           |                                |  |  |
|   | Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$ Spouse \$  |  |  |  |  | \$                    | 664.00    | \$                             |  |  |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 3 of 40

**B22A** (Official Form 22A) (Chapter 7) (12/08)

| 10   | Income from all other sources. Specify source and amount. If necessary, list sources on a separate page. Do not include alimony or separate maintenant paid by your spouse if Column B is completed, but include all other payalimony or separate maintenance. Do not include any benefits received un Security Act or payments received as a victim of a war crime, crime against a victim of international or domestic terrorism. |                    |                    |    |           |  |  |  |  |
|--|---|--------------------|--------------------|----|-----------|--|--|--|--|
|  | b.  | \$                 |                    |    |           |  |  |  |  |
|  | Total and enter on Line 10  |                    | \$                 | \$ |           |  |  |  |  |
| 11   | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 and, if Column B is completed, add Lines 3 through 10 in Column B. Enter t  |                    | \$ 1,197.33        | \$ |           |  |  |  |  |
| 12   | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been con Line 11, Column A to Line 11, Column B, and enter the total. If Column B has completed, enter the amount from Line 11, Column A.  |                    | \$                 |    | 1,197.33  |  |  |  |  |
|  | Part III. APPLICATION OF § 707(B)(7) E  | XCLUSION           |                    |    |           |  |  |  |  |
| 13   | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount 12 and enter the result.  | nt from Line 12 by |                    | \$ | 14,367.96 |  |  |  |  |
| 14   | <b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  |                    |                    |    |           |  |  |  |  |
|  | a. Enter debtor's state of residence: <u>Illinois</u> b. Enter  | debtor's househo   | old size: <b>1</b> | \$ | 47,355.00 |  |  |  |  |
|  | Application of Section707(b)(7). Check the applicable box and proceed as  |                    |                    |    |           |  |  |  |  |
| The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presum not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or |   |                    |                    |    |           |  |  |  |  |
|  | ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.   |                    |                    |    |           |  |  |  |  |

## Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|     |   | Part IV. CALCULATION OF CURRENT MONTHLY INCOME F  | OR § 707(b)(2)                            |    |  |  |
|-----|---|---|---|----|--|--|
| 16  | Ente  | r the amount from Line 12.  |   | \$ |  |  |
| 17  | Line<br>debto<br>paym<br>debto  | <b>Ital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any 11, Column B that was NOT paid on a regular basis for the household expenses of the pr's dependents. Specify in the lines below the basis for excluding the Column B incoment of the spouse's tax liability or the spouse's support of persons other than the debor's dependents) and the amount of income devoted to each purpose. If necessary, list tments on a separate page. If you did not check box at Line 2.c, enter zero. | ne debtor or the ome (such as otor or the |    |  |  |
|     | a.  |   | \$  |    |  |  |
|     | b.  |   | \$  |    |  |  |
|     | c.  |   | \$  |    |  |  |
|     | Tot   | al and enter on Line 17.  |   | \$ |  |  |
| 18  | Curr  | ent monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the r   | esult.                                    | \$ |  |  |
|     |   | Part V. CALCULATION OF DEDUCTIONS FROM INC  | OME                                       |    |  |  |
|     |   | Subpart A: Deductions under Standards of the Internal Revenue Ser   | rvice (IRS)                               |    |  |  |
| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS  National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) |   |   |    |  |  |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 4 of 40

| 19B  | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. |  |  |                               |   |   |   |    |
|------|---|--|--|-------------------------------|---|---|---|----|
|      | Ho  | usehold members under 65 ye  | ears of age  | Hou                           | sehold memb   | ers 65 years of                                       | age or older                            |    |
|      | a1.   | Allowance per member   |  | a2.                           | Allowance p   | er member   |   |    |
|      | b1.   | Number of members  |  | b2.                           | Number of 1   | nembers   |   |    |
|      | c1.   | Subtotal   |  | c2.                           | Subtotal  |   |   | \$ |
| 20A  | and U   | l Standards: housing and util<br>Jtilities Standards; non-mortgaş<br>mation is available at <u>www.usd</u>   | ge expenses for th                                       | e appli                       | cable county a  | and household si                                      |   | \$ |
|      | the II<br>infor   | I Standards: housing and util<br>RS Housing and Utilities Standa<br>mation is available at www.usdotal of the Average Monthly Paract Line b from Line a and ente | ards; mortgage/reacoj.gov/ust/ or from yments for any de | nt expe<br>n the c<br>bts sec | ense for your c<br>lerk of the bar<br>aured by your l | ounty and family<br>kruptcy court); one, as stated in | y size (this enter on Line b n Line 42; |    |
| 20B  | a.  | IRS Housing and Utilities Sta  | ndards; mortgage/  | /rental                       | expense   | \$  |   |    |
|      | b.  | Average Monthly Payment for any, as stated in Line 42  | r any debts secure                                       | d by y                        | our home, if  | \$  |   |    |
|      | c. Net mortgage/rental expense  |  |  |                               |   | Subtract Line l                                       | o from Line a                           | \$ |
| 21   | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:  |  |  |                               |   |   |   |    |
|      | Logo  | l Standards: transportation;   | vohiolo anaration  | ı/nubli                       | io transportat  | ion ovnonco. V  | yu are entitled to                      | \$ |
|      | an ex   | pense allowance in this categor<br>egardless of whether you use pr   | ry regardless of w                                       | hether                        |   |   |   |    |
| 22.4 | expe  | k the number of vehicles for whoses are included as a contribut  |  |                               | · 1   |   | perating                                |    |
| 22A  | _   | 1 2 or more.   | the "Dublic Trans  | nortet                        | ion" amount f   | om IDS I agal S                                       | tan darda.                              |    |
|      | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   |  |  |                               |   |   |   | \$ |
|      |   | l Standards: transportation;   |  |                               |   |   |   |    |
| 22B  |   | nses for a vehicle and also use particular ional deduction for your public   |  |                               |   |   |   |    |
|      | Trans   | sportation" amount from IRS L  | ocal Standards: Ti                                       | ranspo                        | rtation. (This a                                      |   |   | Φ. |
|      | WWW   | .usdoj.gov/ust/ or from the cler   | k of the bankrupto                                       | cy cour                       | t.)   |   |   | \$ |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 5 of 40

| (  | • • · · · · · · · · · · · · · · · ·  |    |  |  |  |  |  |  |
|----|--|----|--|--|--|--|--|--|
| 23 | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. |    |  |  |  |  |  |  |
|    | a. IRS Transportation Standards, Ownership Costs \$  Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 42 \$  |    |  |  |  |  |  |  |
|    | c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a   | \$ |  |  |  |  |  |  |
| 24 |  |    |  |  |  |  |  |  |
|    | a. IRS Transportation Standards, Ownership Costs, Second Car  Average Monthly Payment for any debts secured by Vehicle 2, as   |    |  |  |  |  |  |  |
|    | b. stated in Line 42 \$  |    |  |  |  |  |  |  |
|    | c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a   | \$ |  |  |  |  |  |  |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.   |    |  |  |  |  |  |  |
| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  | \$ |  |  |  |  |  |  |
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  | \$ |  |  |  |  |  |  |
| 28 | <b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due obligations included in Line 44.</b>   | \$ |  |  |  |  |  |  |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  | \$ |  |  |  |  |  |  |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  | \$ |  |  |  |  |  |  |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually average on health care that is required for the health and walfare of yourself or your dependents, that is not   |    |  |  |  |  |  |  |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.   | \$ |  |  |  |  |  |  |
| 33 |  |    |  |  |  |  |  |  |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 6 of 40 Document

|    |  | Subpart B: Additional Li<br>Note: Do not include any expenses  |                       |                              |    |  |
|----|--|--|-----------------------|------------------------------|----|--|
|    | expe   | Ith Insurance, Disability Insurance, and Health Savnses in the categories set out in lines a-c below that ar se, or your dependents. |                       |                              |    |  |
|    | a.   | Health Insurance   | \$                    |                              |    |  |
| 34 | b.   | Disability Insurance   | \$                    |                              |    |  |
| 34 | c.   | Health Savings Account   | \$                    |                              |    |  |
|    | Total  | l and enter on Line 34   |                       |                              | \$ |  |
|    |  | ou do not actually expend this total amount, state you pace below:   | our actual total aver | rage monthly expenditures in |    |  |
| 35 | Continued contributions to the care of household or family members. Enter the total average actual   |  |                       |                              |    |  |
| 36 | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  |  |                       |                              |    |  |
| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  |  |                       |                              |    |  |
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.              |  |                       |                              |    |  |
| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. |  |                       |                              | \$ |  |
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).   |  |                       |                              | \$ |  |
| 41 | Tota   | al Additional Expense Deductions under § 707(b). E   | Enter the total of Li | nes 34 through 40            |    |  |

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 7 of 40

**B22A** (Official Form 22A) (Chapter 7) (12/08)

|    |  | S   | Subpart C  | : Deductions for De   | ebt Payment   |  |    |  |
|----|--|---|--|---|---|--|----|--|
|    | you of Paymenthe to follow   | re payments on secured claims own, list the name of the creditor nent, and check whether the paymotal of all amounts scheduled as a wing the filing of the bankruptcy. Enter the total of the Average N | , identify to<br>nent include<br>contractual<br>case, divi | the property securing<br>des taxes or insurance<br>lly due to each Secur<br>ded by 60. If necessa | the debt, state the A<br>e. The Average Mon<br>red Creditor in the 60 | verage Monthly athly Payment is months   |    |  |
| 42 |  | Name of Creditor  | Property   | Securing the Debt   | Average<br>Monthly<br>Payment   | Does payment include taxes or insurance? |    |  |
|    | a.   |   |  |   | \$  | ☐ yes ☐ no                               |    |  |
|    | b.   |   |  |   | \$  | ☐ yes ☐ no                               |    |  |
|    | c.   |   |  |   | \$  | ☐ yes ☐ no                               |    |  |
|    |  |   |  | Total: Ad   | ld lines a, b and c.  |  | \$ |  |
|    | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. |   |  |   |   |  |    |  |
| 43 | Name of Creditor   |   |  | Property Securing t   | the Debt  | 1/60th of the Cure Amount                |    |  |
|    | a.   |   |  |   |   | \$                                       |    |  |
|    | b.   |   |  |   |   | \$                                       |    |  |
|    | c.   |   |  |   |   | \$                                       |    |  |
|    |  |   |  |   | Total: Ad   | d lines a, b and c.                      | \$ |  |
| 44 | such   | nents on prepetition priority cl<br>as priority tax, child support and<br>ruptcy filing. Do not include cu  | alimony  | claims, for which you   | u were liable at the ti   | me of your                               | \$ |  |
|    | follo  | pter 13 administrative expenses<br>wing chart, multiply the amount<br>nistrative expense.   |  |   |   |  |    |  |
|    | a.   | Projected average monthly cha   | pter 13 pla  | an payment.   | \$  |  |    |  |
| 45 | b.   | Current multiplier for your dist schedules issued by the Execut Trustees. (This information is a <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)                                | ive Office<br>vailable a                                   | for United States   | X   |  |    |  |
|    | c.   | Average monthly administrative case   | e expense  | of chapter 13   | Total: Multiply Lin and b   | es a                                     | \$ |  |
| 46 | Tota   | l Deductions for Debt Payment   | t. Enter the   | e total of Lines 42 th  | rough 45.   |  | \$ |  |
|    |  | S   | ubpart D   | : Total Deductions f  | from Income   |  |    |  |

Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.

47

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 8 of 40

|    | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION  |                |            |          |  |  |  |  |  |
|----|--|----------------|------------|----------|--|--|--|--|--|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2))   |                | \$         |          |  |  |  |  |  |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) \$   |                |            |          |  |  |  |  |  |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the   | result.        | \$         |          |  |  |  |  |  |
| 51 | <b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the numeriter the result.   | ber 60 and     | \$         |          |  |  |  |  |  |
|    | Initial presumption determination. Check the applicable box and proceed as directed.   |                |            |          |  |  |  |  |  |
|    | The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not this statement, and complete the verification in Part VIII. Do not complete the remainder  |                | top of p   | age 1 of |  |  |  |  |  |
| 52 | The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.  |                |            |          |  |  |  |  |  |
|    | ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the rethough 55).  | mainder of Par | t VI (Liı  | nes 53   |  |  |  |  |  |
| 53 | Enter the amount of your total non-priority unsecured debt   |                | \$         |          |  |  |  |  |  |
| 54 | <b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and e result.  | nter the       | \$         |          |  |  |  |  |  |
|    | Secondary presumption determination. Check the applicable box and proceed as directed.   |                |            |          |  |  |  |  |  |
|    | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The protection to page 1 of this statement, and complete the verification in Part VIII.   | esumption does | s not aris | se" at   |  |  |  |  |  |
| 55 | The amount on Line 51 is equal to or greater than the amount on Line 54. Check the arises" at the top of page 1 of this statement, and complete the verification in Part VIII. Y VII.  |                |            |          |  |  |  |  |  |
|    | Part VII. ADDITIONAL EXPENSE CLAIMS  |                |            |          |  |  |  |  |  |
|    | <b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, the and welfare of you and your family and that you contend should be an additional deduction from under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. A average monthly expense for each item. Total the expenses. | om your curren | t monthl   | ly       |  |  |  |  |  |
|    | Expense Description  | Monthly A      | mount      |          |  |  |  |  |  |
| 56 | a.   | \$             |            |          |  |  |  |  |  |
|    | b.   | \$             |            |          |  |  |  |  |  |
|    | c.   | \$             |            |          |  |  |  |  |  |
|    | Total: Add Lines a, b and c  | \$             |            |          |  |  |  |  |  |
|    | Part VIII. VERIFICATION  |                |            |          |  |  |  |  |  |
|    | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.)  |                |            |          |  |  |  |  |  |
| 57 | Date: April 14, 2009 Signature: /s/ Randall W. Arnold  |                |            |          |  |  |  |  |  |
|    | (Debtor)   |                |            |          |  |  |  |  |  |
|    | Date:Signature:(Joint Debtor, if any)  |                |            |          |  |  |  |  |  |

© 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main B1 (Official Form 1) (1/08) Document Page 9 of 40

| United Sta<br>Norther  | 77 7 4 75 404                                      |             |                           |  | luntary Petition |   |  |  |
|--|--|-------------|---------------------------|--|------------------|---|--|--|
| Name of Debtor (if individual, enter Last, First, Midd Arnold, Randall W.  | ile):  |             | Name of Jo                | oint Debt  | or (Spou         | use) (Last, First,  | Middle):   |  |
| All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names): fdba Big Bear Carptet Installation, Inc.  | rs   |             | 1                         |  | -                | e Joint Debtor i<br>nd trade names)   |  | 8 years  |
| Last four digits of Soc. Sec. or Individual-Taxpayer I EIN (if more than one, state all): <b>7735 / 36-4471</b>  |  |             | Last four d<br>EIN (if mo | -  |                  |   | 'axpayer I.  | D. (ITIN) No./Complete   |
| Street Address of Debtor (No. & Street, City, State & 6914 W. Higgins  | : Zip Code):                                       |             | Street Add                | ress of Jo   | oint Deb         | tor (No. & Stree  | et, City, St   | tate & Zip Code):  |
| Chicago, IL  | ZIPCODE <b>60656</b>                               |             |                           |  |                  |   |  | ZIPCODE  |
| County of Residence or of the Principal Place of Bus <b>Cook</b>   | iness:   |             | County of                 | Residenc   | e or of t        | he Principal Pla  | ce of Busi   | iness:   |
| Mailing Address of Debtor (if different from street ad   | idress)  |             | Mailing Ad                | ddress of  | Joint De         | ebtor (if differer  | nt from str  | reet address):   |
|  | ZIPCODE  |             |                           |  |                  |   |  | ZIPCODE  |
| Location of Principal Assets of Business Debtor (if d  | ifferent from street addres                        | ss abo      | ove):                     |  |                  |   |  |  |
|  |  |             |                           |  |                  |   |  | ZIPCODE  |
| Type of Debtor (Form of Organization) (Check one box.)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Filing Fee (Check one box)  Filing Fee (Check one box)  Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration. See Official Form 3B. |  |             |                           | under he  box: s a small s not a sr s aggrega s are less applicabl s being fi nces of th | De Ch            | the Petitio tapter 7 tapter 9 tapter 11 tapter 12 tapter 13 tests are primaril tots, defined in 1 01(8) as "incurr tividual primaril tsonal, family, o d purpose."  Chapter 11 I s debtor as definites debtor as debtor | n is Filed  Character of Charac | u.s.c. § 101(51D).  11 U.s.c. § 101(51D).  owed to non-insiders or |
| Statistical/Administrative Information  Debtor estimates that funds will be available for the Debtor estimates that, after any exempt property distribution to unsecured creditors.  |  |             | id, there v               | will be n  | o funds availab  | le for  | THIS SPACE IS FOR<br>COURT USE ONLY  |  |
| Estimated Number of Creditors  |  | 5,001- 10,0 |                           | 25,001-<br>50,000  |                  | 50,001-<br>100,000  | Over 100,000   |  |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,0 \$50,000 \$100,000 \$500,000 \$1 million \$10   | 000,001 to \$10,000,001<br>million to \$50 million |             | 0,000,001 to 00 million   | \$100,00<br>to \$500   |                  | \$500,000,001<br>to \$1 billion   | More tha   |  |
| Estimated Liabilities  | 000,001 to \$10,000,001 million to \$50 million    |             | 0,000,001 to              |  |                  | \$500,000,001   | More tha   |  |

| Location Where Filed:  | Case Number:   | Date Filed:                           |  |  |  |  |
|--|--|---------------------------------------|--|--|--|--|
| Pending Bankruptcy Case Filed by any Spouse, Partner or  | Affiliate of this Debtor (If mo  | re than one, attach additional sheet) |  |  |  |  |
| Name of Debtor:<br>None  | Case Number:   | Date Filed:                           |  |  |  |  |
| District:  | Relationship:  | Judge:                                |  |  |  |  |
| Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition. | whose debts are primarily consumer debts.)   |                                       |  |  |  |  |
|  | X /s/ Alan J. Spitz  | 4/14/09                               |  |  |  |  |
|  | Signature of Attorney for Debtor(s)  | Date                                  |  |  |  |  |
| (To be completed by every individual debtor. If a joint petition is filed, e   |  |                                       |  |  |  |  |
| (Check any a Debtor has been domiciled or has had a residence, principal place   | preceding the date of this petition or for a longer part of such 180 days than in any other District.  |                                       |  |  |  |  |
| Debtor is a debtor in a foreign proceeding and has its principal plot or has no principal place of business or assets in the United States   | Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. |                                       |  |  |  |  |
| (Check all app   | Certification by a Debtor Who Resides as a Tenant of Residential Property  (Check all applicable boxes.)  Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)   |                                       |  |  |  |  |
| (Name of landlord or less  | or that obtained judgment)   |                                       |  |  |  |  |
| (Address of lar  | ndlord or lessor)  |                                       |  |  |  |  |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Case 09-13155

(This page must be completed and filed in every case)

B1 (Official Form 1) (1/08)

filing of the petition.

Voluntary Petition

Where Filed: None

Location

Doc 1

Filed 04/14/09

Document

Entered 04/14/09 11:51:42 Desc Main

Date Filed:

Page 10 of 40
Name of Debtor(s):

Case Number:

Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Arnold, Randall W.

Page 2

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main B1 (Official Form 1) (1/08) Document Page 11 of 40 Name of Debtor(s): Voluntary Petition Arnold, Randall W. (This page must be completed and filed in every case) Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition is true and correct. petition is true and correct, that I am the foreign representative of a debtor [If petitioner is an individual whose debts are primarily consumer debts in a foreign proceeding, and that I am authorized to file this petition. and has chosen to file under Chapter 7] I am aware that I may proceed (Check only one box.) under chapter 7, 11, 12 or 13 of title 11, United State Code, understand ☐ I request relief in accordance with chapter 15 of title 11, United the relief available under each such chapter, and choose to proceed under States Code. Certified copies of the documents required by 11 U.S.C. chapter 7. § 1515 are attached. [If no attorney represents me and no bankruptcy petition preparer signs Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the the petition] I have obtained and read the notice required by 11 U.S.C. § chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X X /s/ Randall W. Arnold Signature of Foreign Representative Signature of Debtor Randall W. Arnold Χ Printed Name of Foreign Representative Signature of Joint Debtor Date Telephone Number (If not represented by attorney) April 14, 2009 Signature of Attorney\* **Signature of Non-Attorney Petition Preparer** I declare under penalty of perjury that: 1) I am a bankruptcy petition X /s/ Alan J. Spitz preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document Signature of Attorney for Debtor(s) and the notices and information required under 11 U.S.C. §§ 110(b), Alan J. Spitz 2691329 110(h) and 342(b); 3) if rules or guidelines have been promulgated Law Offices of Alan J. Spitz pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services 111 W. Washington #1505 chargeable by bankruptcy petition preparers, I have given the debtor Chicago, IL 60610 notice of the maximum amount before preparing any document for filing (312) 332-3148 for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) April 14, 2009 \*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a Address certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Χ Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this partner whose social security number is provided above. petition is true and correct, and that I have been authorized to file this

petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| Signature of A | uthorized Individ | iual     |  |
|----------------|-------------------|----------|--|
| Printed Name   | of Authorized In  | dividual |  |
| Title of Autho | rized Individual  |          |  |

Page 3

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 09-13155 Doc 1 B1D (Official Form 1, Exhibit D) (12/08)

Filed 04/14/09

Entered 04/14/09 11:51:42 Desc Main

Document Page 12 of 40 United States Bankruptcy Court

**Northern District of Illinois** 

| IN RE:             |           | Case No   |
|--------------------|-----------|-----------|
| Arnold, Randall W. |           | Chapter 7 |
| •                  | Debtor(s) | •         |
|                    |           |           |

#### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps

| to stop creditors' collection activities.   |
|---|
| Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.   |
| 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.  |
| 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.  |
| ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]  |
| If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing. |
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);   |
| <ul> <li>Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);</li> <li>Active military duty in a military combat zone.</li> </ul>  |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.   |
| I certify under penalty of perjury that the information provided above is true and correct.   |

Signature of Debtor: /s/ Randall W. Arnold

Date: April 14, 2009

B6 Summary (Form 6 - Summary) (12/07) Doc 1

Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 13 of 40 United States Bankruptcy Court

| United States Bankrupicy Coul        |
|--------------------------------------|
| <b>Northern District of Illinois</b> |
|                                      |

| IN KE:             |           | Case No.  |
|--------------------|-----------|-----------|
|                    |           |           |
| Arnold, Randall W. |           | Chapter 7 |
|                    | Debtor(s) | •         |

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS        | LIABILITIES   | OTHER       |
|--|----------------------|---------------------|---------------|---------------|-------------|
| A - Real Property  | Yes                  | 1                   | \$ 260,000.00 |               |             |
| B - Personal Property  | Yes                  | 3                   | \$ 3,500.00   |               |             |
| C - Property Claimed as Exempt   | Yes                  | 1                   |               |               |             |
| D - Creditors Holding Secured Claims   | Yes                  | 1                   |               | \$ 310,000.00 |             |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 1                   |               | \$ 0.00       |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 5                   |               | \$ 219,475.03 |             |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |               |               |             |
| H - Codebtors  | Yes                  | 1                   |               |               |             |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                   |               |               | \$ 1,391.00 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |               |               | \$ 1,712.00 |
|  | TOTAL                | 16                  | \$ 263,500.00 | \$ 529,475.03 |             |

Form 6 - Statistical Summary (12/07) Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42

Document Page 14 of 40 United States Bankruptcy Court Northern District of Illinois Desc Main

| IN RE:             |           | Case No   |
|--------------------|-----------|-----------|
| Arnold, Randall W. |           | Chapter 7 |
| ·                  | Debtor(s) |           |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount     |
|---|------------|
| Domestic Support Obligations (from Schedule E)  | \$<br>0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$<br>0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$<br>0.00 |
| Student Loan Obligations (from Schedule F)  | \$<br>0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$<br>0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$<br>0.00 |
| TOTAL   | \$<br>0.00 |

#### State the following:

| Average Income (from Schedule I, Line 16)  | \$<br>1,391.00 |
|--|----------------|
| Average Expenses (from Schedule J, Line 18)  | \$<br>1,712.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20) | \$<br>1,197.33 |

#### State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$<br>50,000.00  |
|--|---------|------------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |                  |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$<br>0.00       |
| 4. Total from Schedule F   |         | \$<br>219,475.03 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$<br>269,475.03 |

Entered 04/14/09 11:51:42 Page 15 of 40

Desc Main

IN RE Arnold, Randall W.

\_\_\_\_\_ Case No. \_

Debtor(s)

(If known)

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY                            | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY |            | AMOUNT OF SECURED<br>CLAIM |
|---|--|---------------------------------------|------------|----------------------------|
| single family home located at 6014 w. higgins, chicago, illiois |  |                                       | 260,000.00 | 310,000.00                 |
|   |  |                                       |            |                            |
|   |  |                                       |            |                            |

**TOTAL** 

260,000.00

| 36B (Official Form 6B) (12/07) 3155 | Doc 1 | Filed 04/14/09 | Entered 04/14/09 11:51: |
|-------------------------------------|-------|----------------|-------------------------|
|                                     |       | Document       | Page 16 of 40           |

Debtor(s)

IN RE Arnold, Randall W.

Case No. \_

Desc Main

(If known)

**SCHEDULE B - PERSONAL PROPERTY** 

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| 1.  | Cash on hand.   |                  | Cash                                 |                                       | 50.00  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | TCF Bank - checking and savings      |                                       | 200.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |                                      |                                       |  |
| 4.  | Household goods and furnishings, include audio, video, and computer equipment.  | X                |                                      |                                       |  |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | X                |                                      |                                       |  |
| 6.  | Wearing apparel.  |                  | wearing apparel                      |                                       | 250.00   |
| 7.  | Furs and jewelry.   | Х                |                                      |                                       |  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X                |                                      |                                       |  |
| 9.  | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  | X                |                                      |                                       |  |
| 10. | Annuities. Itemize and name each issue.   | X                |                                      |                                       |  |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |                                      |                                       |  |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |                                       |  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |                                       |  |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |                                       |  |
|     |   |                  |                                      |                                       |  |

IN RE Arnold, Randall W.

Document

Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Page 17 of 40

Debtor(s)

\_ Case No. \_\_ (If known)

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments.   | X                |                                      |                                       |  |
| 16. | Accounts receivable.  | X                |                                      |                                       |  |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  | X                |                                      |                                       |  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |                                       |  |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |                                      |                                       |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |                                       |  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |                                       |  |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                      |                                       |  |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |                                       |  |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |                                       |  |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  |                  | 2001 Ford Echoline Van 93,000 miles  |                                       | 3,000.00   |
| 26. | Boats, motors, and accessories.   | X                |                                      |                                       |  |
| 27. | Aircraft and accessories.   | X                |                                      |                                       |  |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                      |                                       |  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |                                       |  |
| 30. | Inventory.  | X                |                                      |                                       |  |
|     | Animals.  | X                |                                      |                                       |  |
| 32. | Crops - growing or harvested. Give particulars.   | X                |                                      |                                       |  |
|     |   |                  |                                      |                                       |  |
|     |   |                  |                                      |                                       |  |

| BGB (Official ECASE) 99-13155          | Doc 1 | Filed 04/14/09 | Entered 04/14/09 11:51:42 | Desc Main |
|--|-------|----------------|---------------------------|-----------|
| Dob (Official Form ob) (12/07) - Cont. |       | Document       | Page 18 of 40             |           |

Debtor(s)

IN RE Arnold, Randall W.

Case No. \_

(If known)

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 33. Farming equipment and implements.                                | X                |                                      |                                       |  |
| 34. Farm supplies, chemicals, and feed.                              | X                |                                      |                                       |  |
| 35. Other personal property of any kind not already listed. Itemize. | Х                |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  | TO                                   | ΓAL                                   | 3,500.00   |

| B6C (Official Form Se) (12/01)3155 | Doc 1 | Filed 04/14/09 | Entered 04/14/09 1 |
|------------------------------------|-------|----------------|--------------------|
| boe (official Form 6e) (12/07)     |       | Document       | Page 10 of 40      |

Page 19 01 40

| /09 11:51:42 | Desc Main |
|--------------|-----------|
|              |           |

(If known)

IN RE Arnold, Randall W. Debtor(s) Case No. \_

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| ebtor elects the exemptions to which debtor is entitled under: | Check if debtor claims a homestead exemption that exceeds \$136,875 |
|--|---|
| sick the box)  |   |

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY   | SPECIFY LAW PROVIDING EACH EXEMPTION  | VALUE OF CLAIMED<br>EXEMPTION         | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|---|---------------------------------------|--|
| SCHEDULE B - PERSONAL PROPERTY Cash TCF Bank - checking and savings wearing apparel 2001 Ford Echoline Van 93,000 miles | 735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(a) 735 ILCS 5 §12-1001(c) | 50.00<br>200.00<br>250.00<br>2,400.00 | 50.00<br>200.00<br>250.00<br>3,000.00                  |
| .001 Ford Echoline van 95,000 miles   | 733 ILCS 3 §12-1001(c)  | 2,400.00                              | 3,000.0  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |
|   |   |                                       |  |

Entered 04/14/09 11:51:42 Page 20 of 40

(If known)

Case No.

IN RE Arnold, Randall W.

Debtor(s)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions Above.)       | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 08 CH 32660  |          |                                       | foreclosure on real estate located at 6914   |            |              |          | 252,000.00  |                              |
| Deutsche Bank National Trust Company<br>C/O Pierce & Associates<br>One North Dearborn #1300<br>Chicago, IL 60602 |          |                                       | W. Higgins, Chicago, Illinois.   |            |              |          |   |                              |
|  |          |                                       | VALUE \$ 260,000.00  |            |              |          |   |                              |
| ACCOUNT NO. 104648409  |          |                                       | 2nd mortgage   |            |              |          | 58,000.00   | 50,000.00                    |
| First Franklin Loan Services<br>P.O. Box 1838<br>Pittsburgh, PA 15230  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$ 260,000.00  |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ocntinuation sheets attached   |          |                                       | (Total of th   |            | otota        |          | \$ 310,000.00   | \$ 50,000.00                 |
|  |          |                                       | (Use only on la  |            | Tota<br>page |          | \$ 310,000.00   | \$ 50,000.00                 |

(Report also on

(If applicable, report also on Statistical Summary of Schedules.) Summary of Certain Liabilities and Related Data.)

Entered 04/14/09 11:51:42 Page 21 of 40

Desc Main

(If known)

IN RE Arnold, Randall W.

© 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

Case No.

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. ✓ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen

#### **Taxes and Certain Other Debts Owed to Governmental Units**

were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

Deposits by individuals

| REF (Official FC ASE 09-13155  | Doc 1 | Filed 04/14/09 | Entered 04/14/09 11:51:42 | Desc Main |
|--------------------------------|-------|----------------|---------------------------|-----------|
| 501 (Official Form 01) (12/07) |       | Document       | Page 22 of 40             |           |

IN RE Arnold, Randall W.

rage 22

Case No. \_\_

(If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Debtor(s)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT  | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|----------|---------------------------------------|---|-------------|--------------|----------|-----------------------|
| ACCOUNT NO. <b>268749442</b>   |          |                                       |   |             |              |          |                       |
| AT&T Mobility<br>P.O. Box 6428<br>Carol Stream, IL 60197-6428                                      |          |                                       |   |             |              |          | 412.00                |
| ACCOUNT NO. <b>10374191</b>  |          |                                       |   |             |              |          |                       |
| AIG UnitedGuaranty<br>P.O. Box 20327<br>230 N. Elm Street/27401<br>Greensboro, NC 27420-0327       |          |                                       |   |             |              |          | 60,252.00             |
| ACCOUNT NO. xxxxx-xxxxx5-32003   |          |                                       | in name of Big Bear Carpet and Lynette Amato  |             |              |          | ·                     |
| American Express<br>Box 0001<br>Los Angeles, CA 90096-0001   |          |                                       |   |             |              |          | 19,274.00             |
| ACCOUNT NO. <b>5178-0525-0807-8694</b>   |          |                                       |   |             |              |          | ·                     |
| Capital One<br>P.O. Box 30285<br>Salt Lake City, UT 84130-0285                                     |          |                                       |   |             |              |          | 878.00                |
|  | _        |                                       | <u> </u><br>  | Sub         | tota         | al       |                       |
| 4 continuation sheets attached   |          |                                       | (Total of thi   | s p         | age          | e)       | \$ 80,816.00          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules and, if applicable, on the Sta<br>Summary of Certain Liabilities and Related | als<br>atis | tica         | n<br>al  | \$                    |

Page 23 of 40

Case No. \_

IN RE Arnold, Randall W.

Debtor(s)

(If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | ((                                    | Continuation Sheet)   |            |              |          |                       |
|--|----------|---------------------------------------|---|------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  | T        |                                       | Assignee or other notification for:   |            |              |          |                       |
| NCO Financial Systems, Inc.<br>507 Prudential Road<br>Horsham, PA 19044                                  |          |                                       | Capital One   |            |              |          |                       |
| ACCOUNT NO. XXXXXX1836   |          |                                       |   |            |              |          |                       |
| Cardmember Services<br>P.O. Box 15298<br>Wilmington, DE 19850-5298                                       |          |                                       |   |            |              |          | 1,382.00              |
| ACCOUNT NO. <b>4246-3151-2386-9487</b>   |          |                                       | claim against Big Bear Carpet and Lynette Amato   |            |              |          | 1,362.00              |
| Cardmember Services<br>P.O. Box 15153<br>Wilmington, DE 19886-5153                                       |          |                                       |   |            |              |          | 12 605 00             |
| ACCOUNT NO. <b>111000000693675357</b>  |          |                                       |   |            |              |          | 12,605.00             |
| Chase Bank<br>340 S. Cleveland Aveneu #370<br>Westerville, OH 43081                                      |          |                                       |   |            |              |          |                       |
| ACCOUNT NO. <b>008504798-03-6010</b>   |          |                                       |   |            |              |          | 320.00                |
| Chase Bank USA NA<br>C/O Valentine & Kebartas, Inc.<br>P.O. Box 325<br>Lawrence, MA 01842                |          |                                       |   |            |              |          | 1,457.00              |
| ACCOUNT NO. <b>5187 2800 4426 4235</b>   | $\vdash$ |                                       |   |            |              | Н        | 1,437.00              |
| Citi Cards<br>Box 6000<br>The Lakes, NV 89163  |          |                                       |   |            |              |          |                       |
| ACCOUNT NO. <b>5013048180</b>  | +        |                                       |   | H          |              |          | 6,262.26              |
| City Of Chicago Department Of Revenue P.O. Box 88292   |          |                                       |   |            |              |          |                       |
| Chicago, IL 60680-1292   |          |                                       |   |            |              |          | 4 240 00              |
| Sheet no. 1 of 4 continuation sheets attached to   |          |                                       |   | Sub        | tota         | ıl       | 1,240.00              |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the   | is p       |              | ;)       | \$ 23,266.26          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | als        | o o<br>tica  | n<br>al  | \$                    |

Page 24 of 40

Entered 04/14/09 11:51:42 Desc Main

(If known)

Case No. \_

IN RE Arnold, Randall W.

Debtor(s)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |           | (                                     | Continuation Sheet)   |                |              |          |                       |
|--|-----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)         | CODEBTOR  | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  | $\dagger$ |                                       | Assignee or other notification for:   |                |              | H        |                       |
| Arnold Scott Harris, P.C.<br>609 W. Jackson Blvd. #710<br>Chicago, IL 60661                                |           |                                       | City Of Chicago   |                |              |          |                       |
| ACCOUNT NO. <b>797636-399447</b>   | +         |                                       |   |                |              | H        |                       |
| City Of Chicago<br>Department Of Water Management<br>P.O. Box 6330<br>Chicago, IL 60680-6330               |           |                                       |   |                |              |          | 265.00                |
| ACCOUNT NO. <b>9842695</b>   | $\dagger$ |                                       | parking/red-light tickets   |                |              |          |                       |
| City Of Chicago<br>C/O Llinebarger, Goggan, Blair & Sampson<br>P.O. Box 06152<br>Chicago, IL 60606-0152    |           |                                       |   |                |              |          | 2,490.00              |
| ACCOUNT NO. <b>13-07-105-060-0000-324</b>  | T         |                                       | 2007 real estate taxes for 6914 w. higgins,   |                |              |          | ·                     |
| Cook County Treasurer<br>P.O. Box 4488<br>Carol Stream, IL 60197-4488                                      |           |                                       | chicago, illionis.  |                |              |          |                       |
| ACCOUNT NO. 13-08-105-060-0000-324  County Clerk Of Cook County 118 N. Clark Street #434 Chicago, IL 60602 |           |                                       | deliquent real estate taxes for 6914 w. higgins, chicago, illinois  |                |              |          | 3,614.00              |
| ACCOUNT NO. <b>45020825</b>  | +         |                                       |   |                |              | $\dashv$ | 3,667.00              |
| DirecTV P.O. Box 6550 Greenwood Village, CO 80155-6550   |           |                                       |   |                |              |          | 389.00                |
| ACCOUNT NO. <b>702127133085738</b>   | +         |                                       |   |                |              |          | 303.00                |
| HSBC Best Buy<br>P.O. Box 5253<br>Carol Stream, IL 60197   |           |                                       |   |                |              |          |                       |
|  |           |                                       |   |                |              | Ц        | 314.00                |
| Sheet no2 of4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims   |           |                                       | (Total of the   | _              | age          | )        | \$ 10,739.00          |
|  |           |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | tica         | n<br>al  | \$                    |

Page 25 of 40

Entered 04/14/09 11:51:42 Desc Main

(If known)

IN RE Arnold, Randall W.

Debtor(s)

Case No.

Summary of Certain Liabilities and Related Data.) \$

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)  |              |              |           |                       |
|--|----------|---------------------------------------|--|--------------|--------------|-----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)                   | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE             | CONTINGENT   | UNLIQUIDATED | DISPUTED  | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |              |              |           |                       |
| Atlantic Credit & Finance, Inc.<br>P.O. Box 13386<br>Roanoke, VA 24033-3386  |          |                                       | HSBC Best Buy  |              |              |           |                       |
| ACCOUNT NO. <b>5176-6900-1980-1005</b>   |          |                                       |  |              |              | H         |                       |
| Hsbc Card Services<br>P.O. Box 81622<br>Salinas, CA 93912-1622   |          |                                       |  |              |              |           |                       |
| ACCOUNT NO. <b>5438-5700-0657-5065</b>   | -        |                                       |  |              | L            |           | 1,462.00              |
| HSBC Card Services P.O. Box 60167 City Of Industry, CA 91716-0167  |          |                                       |  |              |              |           | 716.77                |
| ACCOUNT NO.  |          |                                       |  |              |              |           | 710.77                |
| Jeffery M. Leving, LTD.<br>19 S. LaSalle Street #450<br>Chicago, IL 60603  |          |                                       |  |              |              |           | 0.500.00              |
| ACCOUNT NO. <b>08 L 012276</b>   | +        |                                       | In the Circuit Court of Cook County.   |              |              | $\forall$ | 9,500.00              |
| JP Morgan Chase Bank, N.A.<br>C/O Wilson, Elser, Moskowitz, Edelman &<br>120 N. LaSalle Street # 2600<br>Chicago, IL 60602 |          |                                       |  |              |              |           | 49,553.00             |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |              |              |           | ,                     |
| Chase<br>P. O. Box 260161<br>Baton Rouge, LA 70826-0161  |          |                                       | JP Morgan Chase Bank, N.A.   |              |              |           |                       |
| ACCOUNT NO.  |          |                                       | former partner in Big Bear Carpet  |              |              | $\forall$ |                       |
| Lynette Amato<br>5787 North Eastcircle<br>Chicago, IL 60656  |          |                                       |  |              |              |           | 19,000.00             |
| Sheet no. 3 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims                |          |                                       | (Total of t  | Sub<br>nis p |              |           | \$ 80,231.77          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the S | T<br>t als   | Γota<br>so o | al<br>n   | th.                   |

Entered 04/14/09 11:51:42 Page 26 of 40 Desc Main

(If known)

IN RE Arnold, Randall W.

Debtor(s)

Case No.

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)   |               |              |          |                       |
|--|----------|---------------------------------------|---|---------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT    | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | debt owed former wife 92 D 6620   | П             |              | 一        |                       |
| Rosemary Sanchez<br>225 Grove<br>Oak Park, IL 60301-6304   |          |                                       |   |               |              |          | 24,382.00             |
| ACCOUNT NO. <b>2683443283</b>  | $\vdash$ |                                       |   | П             |              | $\dashv$ |                       |
| The Billing Center<br>A Subsidiary Of Time Inc.<br>P.O. Box 60001<br>Tampa, FL 33660-0001                |          |                                       |   |               |              |          | 40.00                 |
| ACCOUNT NO.  |          |                                       |   |               |              |          |                       |
|  |          |                                       |   |               |              |          |                       |
| ACCOUNT NO.  | _        |                                       |   |               |              |          |                       |
| ACCOUNT NO.  | -        |                                       |   |               |              |          |                       |
| ACCOUNT NO.  | -        |                                       |   |               |              |          |                       |
|  |          |                                       |   |               |              |          |                       |
| ACCOUNT NO.  |          |                                       |   |               |              |          |                       |
| Sheet no   |          |                                       | :<br>(Total of th   |               | age          | )        | \$ 24,422.00          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules, and if applicable, on the St<br>Summary of Certain Liabilities and Relate | also<br>atist | tica         | n<br>al  | \$ 219,475.03         |

| B6G (Official Form 6G) (12/07) | Doc 1 | Filed 04/14/09 | Entered 04/14/09 11:51:42 | Desc Main |  |
|--------------------------------|-------|----------------|---------------------------|-----------|--|
|                                |       | Document       | Page 27 of 40             |           |  |
| IN RE Arnold, Randall W.       |       |                | Case No.                  |           |  |

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(If known)

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

Debtor(s)

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. |
|---|--|
|   | STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |

| RGH (Official Case 09-13155      | Doc 1    | Filed 04/14/09 | Entered 04/14/09 11:51:42 | Desc Main |  |
|----------------------------------|----------|----------------|---------------------------|-----------|--|
| Bott (Official Form off) (12/07) | Document | Page 28 of 40  |                           |           |  |
| IN RE Arnold, Randall W.         |          |                | Case No.                  |           |  |

Debtor(s)

(If known)

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |

Entered 04/14/09 11:51:42 Page 29 of 40 Desc Main

IN RE Arnold, Randall W.

\_\_\_\_ Case No. \_

Debtor(s)

(If known)

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status  | DEPENDENTS OF   | F DEBTOR AND  | SPOUS      | SE       |          |
|--|---|---------------|------------|----------|----------|
| Single   | RELATIONSHIP(S):  |               |            |          | AGE(S):  |
|  |   |               |            |          |          |
|  |   |               |            |          |          |
|  |   |               |            |          |          |
|  |   |               |            |          |          |
| EMPLOYMENT:  | DEBTOR  |               |            | SPOUSE   |          |
| Occupation   |   |               |            |          |          |
| Name of Employer   |   |               |            |          |          |
| How long employed  |   |               |            |          |          |
| Address of Employer  |   |               |            |          |          |
|  |   |               |            |          |          |
| =  | r projected monthly income at time case filed)                  |               |            | DEBTOR   | SPOUS    |
|  | alary, and commissions (prorate if not paid mon                 | thly)         | \$         |          | \$       |
| 2. Estimated monthly overtime  |   |               | \$         |          | \$       |
| 3. SUBTOTAL  |   |               | \$         | 0.00     | \$       |
| 4. LESS PAYROLL DEDUCTION  |   |               |            |          |          |
| a. Payroll taxes and Social Secur  | ity   |               | \$         |          | \$       |
| b. Insurance   |   |               | \$         |          | \$       |
| c. Union dues  |   |               | \$         |          | \$       |
| d. Other (specify)   |   |               | \$         |          | \$       |
| 5. SUBTOTAL OF PAYROLL I   | DEDUCTIONS  |               | \$         | 0.00     | \$<br>\$ |
| 6. TOTAL NET MONTHLY TA  | KE HOME PAY   |               | \$         | 0.00     | \$       |
|  |   |               |            | ,        |          |
|  | of business or profession or farm (attach detaile               | d statement)  | \$         |          | \$       |
| <ul><li>8. Income from real property</li><li>9. Interest and dividends</li></ul> |   |               | \$         |          | \$       |
|  | ort payments payable to the debtor for the debto                | r'e uso or    | <b>a</b> — |          | <b>a</b> |
| that of dependents listed above  | ort payments payable to the debtor for the debto                | or stuse or   | \$         |          | \$       |
| 11. Social Security or other govern  | ment assistance   |               | Ψ          |          | Ψ        |
|  |   |               | \$         |          | \$       |
|  |   |               | \$         |          | \$       |
| 12. Pension or retirement income   |   |               | \$         |          | \$       |
| 13. Other monthly income   |   |               | Φ          | 4 004 00 | ф        |
| (Specify) <b>Unemployment Comp</b>   | pensation   |               | \$         |          | \$       |
|  |   |               | \$         |          | \$<br>   |
|  |   |               | Ψ          |          | Ψ        |
| 14. SUBTOTAL OF LINES 7 TH   | HROUGH 13   |               | \$         | 1,391.00 | \$       |
| 15. AVERAGE MONTHLY INC  | <b>COME</b> (Add amounts shown on lines 6 and 14)               |               | \$         | 1,391.00 | \$       |
| 46 6016000000000000000000000000000000000   |   | 0 11 1=       |            |          |          |
| <b>16. COMBINED AVERAGE MO</b> if there is only one debtor repeat to             | ONTHLY INCOME: (Combine column totals otal reported on line 15) | from line 15; |            | \$       | 1,391.00 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

IN RE Arnold, Randall W.

© 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

Case No. \_ (If known)

| SCHEDULE J - CORRENT EAI ENDITORES OF INDIVIDUAL DEBTOR   | (3)                          |                                       |
|---|------------------------------|---------------------------------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the decon Form22A or 22C. | any payment<br>ductions fron | ts made biweekly,<br>n income allowed |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete  | a separat                    | e schedule of                         |
| expenditures labeled "Spouse."  | a separat                    | e senedare or                         |
| experiutures rabered spouse.  |                              |                                       |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$                           | 700.00                                |
| a. Are real estate taxes included? Yes No <u>✓</u>  |                              |                                       |
| b. Is property insurance included? Yes No   |                              |                                       |
| 2. Utilities:   |                              |                                       |
| a. Electricity and heating fuel   | \$                           | 100.00                                |
| b. Water and sewer  | \$                           | 100.00                                |
| c. Telephone  | \$ —                         | 150.00                                |
| 1.04  | \$ ——                        | 100.00                                |
| d. Other Gas  Cable Tv  | — ¢ —                        | 42.00                                 |
| 3. Home maintenance (repairs and upkeep)  | — ¢ —                        | 42.00                                 |
| 4. Food   | • —                          | 240.00                                |
|   | , —                          |                                       |
| 5. Clothing   |                              | 80.00                                 |
| 6. Laundry and dry cleaning   | <b>3</b> —                   |                                       |
| 7. Medical and dental expenses  | \$                           |                                       |
| 8. Transportation (not including car payments)  | \$                           | 200.00                                |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$                           |                                       |
| 10. Charitable contributions  | \$                           |                                       |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |                              |                                       |
| a. Homeowner's or renter's  | \$                           |                                       |
| b. Life   | \$                           |                                       |
| c. Health   | \$                           |                                       |
| d. Auto   | \$                           | 100.00                                |
| e. Other  | \$                           |                                       |
|   | \$                           |                                       |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |                              |                                       |
| (Specify)   | \$                           |                                       |
|   |                              |                                       |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)   |                              |                                       |
| a. Auto   | \$                           |                                       |
| b. Other  | \$                           |                                       |
|   | ·                            |                                       |
| 14. Alimony, maintenance, and support paid to others  | \$                           |                                       |
| 15. Payments for support of additional dependents not living at your home   | \$                           |                                       |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$ —                         |                                       |
|   | Φ                            |                                       |
|   | — ¢ —                        |                                       |
|   | — ¢ —                        |                                       |
|   | — <sub>•</sub> —             |                                       |
| 10 AVED ACE MONOTH V EXDENOED (F. 11' 117 D 1 C   |                              |                                       |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if   | φ.                           | 4 740 00                              |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data.   | \$ —                         | 1,712.00                              |
|   | _                            |                                       |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing o   | f this docu                  | ıment:                                |
| None  |                              |                                       |

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$<br>1,391.00 |
|--|----------------|
| b. Average monthly expenses from Line 18 above       | \$<br>1,712.00 |
| c. Monthly net income (a. minus b.)                  | \$<br>-321.00  |

(If known)

IN RE Arnold, Randall W.

© 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

knowledge, information, and belief.

Debtor(s)

Case No.

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: April 14, 2009 Signature: /s/ Randall W. Arnold Randall W. Arnold Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a I, the member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus I), and that they are true and correct to the best of my

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

\_\_\_\_\_ Signature: \_\_\_\_\_

 $_{B7\,(Official\,Form 7)\,(1207)} Case 09-13155$ Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Document Page 32 of 40

United States Bankruptcy Court Northern District of Illinois

Desc Main

| IN RE:             |           | Case No   |
|--------------------|-----------|-----------|
| Arnold, Randall W. |           | Chapter 7 |
|                    | Debtor(s) | *         |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| Case 09-13155 | Doc 1 | Filed 04/14/09 | Entered 04/14/09 11:51:42 | Desc Main |
|---------------|-------|----------------|---------------------------|-----------|
|               |       | Document       | Page 33 of 40             |           |

None c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None
a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Law Offices Of Alan Spitz 111 W. Washington #1505 Chicago, IL 60602 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR **410-09**  AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 1,500.00

#### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.  $\checkmark$ 

#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

DATES OF OCCUPANCY

NAME USED

**ADDRESS** 

5787 East Circle, Chicago, Illinois 60631

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Mai Document Page 35 of 40

#### 18. Nature, location and name of business

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: April 14, 2009 | Signature /s/ Randall W. Arnold      |                   |
|----------------------|--------------------------------------|-------------------|
|                      | of Debtor                            | Randall W. Arnold |
| Date:                | Signature                            |                   |
|                      | of Joint Debtor                      |                   |
|                      | (if any)                             |                   |
|                      | <b>0</b> continuation pages attached |                   |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

Case 09-13155 Doc 1

B8 (Official Form 8) (12/08)

© 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

# Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 36 of 40 United States Bankruptcy Court Northern District of Illinois

| IN RE:  |                           |  | Case No  |
|---|---------------------------|--|--|
| Arnold, Randall W.  |                           | (  | Chapter 7  |
|   | tor(s)                    |  |  |
| CHAPTER 7 IND   | IVIDUAL DEBTO             | OR'S STATEMENT O   | F INTENTION  |
| <b>PART A</b> – Debts secured by property of the estate. Attach additional pages if necessary.)       |                           | e fully completed for <b>EACI</b>  | <b>H</b> debt which is secured by property of the                    |
| Property No. 1  |                           |  |  |
| Creditor's Name:<br>Deutsche Bank National Trust Company  |                           | Describe Property Securing Debt: single family home located at 6014 w. higgins, chicago, illioi    |  |
| Property will be <i>(check one)</i> :  ✓ Surrendered ☐ Retained                                       |                           |  |  |
| If retaining the property, I intend to (check a Redeem the property Reaffirm the debt Other. Explain  | at least one):            | (for examp   | ole, avoid lien using 11 U.S.C. § 522(f)).                           |
| Property is (check one):  ☐ Claimed as exempt ✓ Not claimed as  | s exempt                  |  |  |
| Property No. 2 (if necessary)   |                           | ]  |  |
| Creditor's Name: First Franklin Loan Services   |                           | Describe Property Securing Debt:<br>single family home located at 6014 w. higgins, chicago, illioi |  |
| Property will be (check one): ✓ Surrendered ☐ Retained  |                           |  |  |
| If retaining the property, I intend to (check of Redeem the property Reaffirm the debt Other. Explain | at least one):            | (for examp   | ole, avoid lien using 11 U.S.C. § 522(f)).                           |
| Property is (check one):  ☐ Claimed as exempt ✓ Not claimed as  | s exempt                  |  |  |
| PART B – Personal property subject to unexpadditional pages if necessary.)                            | ired leases. (All three c | columns of Part B must be c  | completed for each unexpired lease. Attach                           |
| Property No. 1  |                           |  |  |
| Lessor's Name:  | Describe Leased           | Property:  | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ Yes ☐ No |
| Property No. 2 (if necessary)   |                           |  |  |
| Lessor's Name:  |                           |  | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ Yes ☐ No |
| continuation sheets attached (if any)   |                           |  | -  |
| I declare under penalty of perjury that the personal property subject to an unexpired                 |                           | intention as to any prope  | erty of my estate securing a debt and/or                             |
| Date: <b>April 14, 2009</b>   | /s/ Randall W. Arno       | ıld  |  |
|   | Signature of Debtor       | - <del>-</del>   |  |

Signature of Joint Debtor

# Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 37 of 40 United States Bankruptcy Court Northern District of Illinois

IN RE:

Arnold, Randall W.

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors \_\_\_\_\_29

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: April 14, 2009

/s/ Randall W. Arnold
Debtor

Joint Debtor

Entered 04/14/09 11:51:42 Case 09-13155 Doc 1 Filed 04/14/09 Desc Main Page 38 of 40

Arnold, Randall W. 6914 W. Higgins Chicago, IL 60656

Document Chase P. O. Box 260161

Baton Rouge, LA 70826-0161

**DirecTV** P.O. Box 6550

Greenwood Village, CO 80155-6550

Law Offices of Alan J. Spitz 111 W. Washington #1505 Chicago, IL 60610

**Chase Bank** 340 S. Cleveland Aveneu #370 Westerville, OH 43081

First Franklin Loan Services P.O. Box 1838 Pittsburgh, PA 15230

**AT&T Mobility** P.O. Box 6428 Carol Stream, IL 60197-6428 Chase Bank USA NA C/O Valentine & Kebartas, Inc. P.O. Box 325 Lawrence, MA 01842

**HSBC Best Buy** P.O. Box 5253 Carol Stream, IL 60197

**AIG UnitedGuaranty** P.O. Box 20327 230 N. Elm Street/27401 Greensboro, NC 27420-0327 Citi Cards Box 6000 The Lakes, NV 89163 **Hsbc Card Services** P.O. Box 81622 Salinas, CA 93912-1622

**American Express** Box 0001 Los Angeles, CA 90096-0001 City Of Chicago **Department Of Revenue** P.O. Box 88292 Chicago, IL 60680-1292

**HSBC Card Services** P.O. Box 60167 City Of Industry, CA 91716-0167

Arnold Scott Harris, P.C. 609 W. Jackson Blvd. #710 Chicago, IL 60661

City Of Chicago **Department Of Water Management** P.O. Box 6330 Chicago, IL 60680-6330

Jeffery M. Leving, LTD. 19 S. LaSalle Street #450 Chicago, IL 60603

Atlantic Credit & Finance, Inc. P.O. Box 13386 Roanoke, VA 24033-3386

City Of Chicago P.O. Box 06152

Chicago, IL 60606-0152

JP Morgan Chase Bank, N.A. C/O Llinebarger, Goggan, Blair & Sampson C/O Wilson, Elser, Moskowitz, Edelman & 120 N. LaSalle Street # 2600 Chicago, IL 60602

**Capital One** P.O. Box 30285 Salt Lake City, UT 84130-0285 **Cook County Treasurer** P.O. Box 4488 Carol Stream, IL 60197-4488 Lynette Amato **5787 North Eastcircle** Chicago, IL 60656

**Cardmember Services** P.O. Box 15298 Wilmington, DE 19850-5298 **County Clerk Of Cook County** 118 N. Clark Street #434 Chicago, IL 60602

NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044

**Cardmember Services** P.O. Box 15153 Wilmington, DE 19886-5153 **Deutsche Bank National Trust Company** C/O Pierce & Associates One North Dearborn #1300 Chicago, IL 60602

**Rosemary Sanchez** 225 Grove Oak Park, IL 60301-6304 Case 09-13155 Doc 1 Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main Document Page 39 of 40

The Billing Center A Subsidiary Of Time Inc. P.O. Box 60001 Tampa, FL 33660-0001

#### Case 09-13155 Doc 1

Filed 04/14/09 Entered 04/14/09 11:51:42 Desc Main

Document Page 40 of 40

**United States Bankruptcy Court Northern District of Illinois** 

|  | 2. |
|--|----|
|  | 3. |
|  | 4. |
| © 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only | 5. |
| 0  | 6. |

IN RE: Case No. Chapter 7 Arnold, Randall W.

Debtor(s)

|    | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  |
|----|--|
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |
|    | For legal services, I have agreed to accept  |
|    | Prior to the filing of this statement I have received  |
|    | Balance Due  |
| 2. | The source of the compensation paid to me was:  Debtor  Other (specify):   |
| 3. | The source of compensation to be paid to me is:  Debtor  Other (specify):  |
| 4. | I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.   |
|    | I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  |
| 5  | In return for the above-disclosed fee. I have agreed to render legal service for all aspects of the bankruptcy case, including:  |

- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - Representation of the debtor in adversary proceedings and other contested bankruptcy matters; d.
  - [Other provisions as needed]

By agreement with the debtor(s), the above disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 14, 2009

Date

/s/ Alan J. Spitz

Alan J. Spitz 2691329 Law Offices of Alan J. Spitz 111 W. Washington #1505 Chicago, IL 60610 (312) 332-3148